IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.:10/604,899   Applicant(s): Hagois et al.

Filed.: August 26, 2003   Art Unit: 2832

Dkt. No.: BUR920030063US1   Examiner: Tuyen T. Nguyen

Title: **WAFER TEST SPACE TRANSFORMER**

Honorable Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR RECONSIDERATION

This Request for Reconsideration is being filed in response to the Office Action mailed

on December 28, 2004.

03/07/2085 TDAWKINS 00909003 090456   10604899

S/N 10/604,899   1   01 FC:1202   450.00 DA

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CONCLUSION

Based on the preceding arguments, Applicants respectfully believe that all pending claims and the entire application meet the acceptance criteria for allowance and therefore request favorable action. If Examiner believes that anything further would be helpful to place the application in better condition for allowance, Applicants invite the Examiner to contact the Applicants' representative at the telophone number listed below. The Director is hereby authorized to charge and/or credit Deposit Account 09-0456.

Respectfully submitted,
FOR: Hagois et al.

Dated: 03/03/2005

BY:

Jack P. Friedman
Reg. No. 44,688
FOR:
Anthony M. Palagonia
Registration No.: 41,237

3 Loar Jet Lane, Suite 201
Schmeiser, Olsen & Watts
Latham, New York 12110
(518) 220-1850
Agent Direct Dial Number: (802)-899-5460

PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number
10604899

CLAIMS AS FILED – PART I

	(Column 1)	(Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE		RATE	FE
BASIC FEE (37 CFR 1.16(a))					$	OR		$
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	•		X $____ =		OR	X $____ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	•		X $____ =		OR	X $____ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ $____ =		OR	+ $____ =	
				TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

		(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FE
	Total (37 CFR 1.16(c))	•	Minus	••	=	X $____ =		OR	X $____ =	
	Independent (37 CFR 1.16(b))	•	Minus	•••	=	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

		(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FE
	Total (37 CFR 1.16(c))	30	Minus	21	= 9	X $____ =		OR	X $ 50 =	450
	Independent (37 CFR 1.16(b))	3	Minus	3	= —	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	450 pd.

		(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FE
	Total (37 CFR 1.16(c))	•	Minus	••	=	X $____ =		OR	X $____ =	
	Independent (37 CFR 1.16(b))	•	Minus	•••	=	X $____ =		OR	X $____ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $____ =		OR	+ $____ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.